

Commonwealth of Massachusetts

Center for Health Information and Analysis

## All Payer Claims Database Data Volume Reports

2008 - 2012

**March 2013** 

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: <a href="mailto:CHIA-APCD@state.ma.us">CHIA-APCD@state.ma.us</a>.

Thank you for your interest in the All Payer Claims Database.

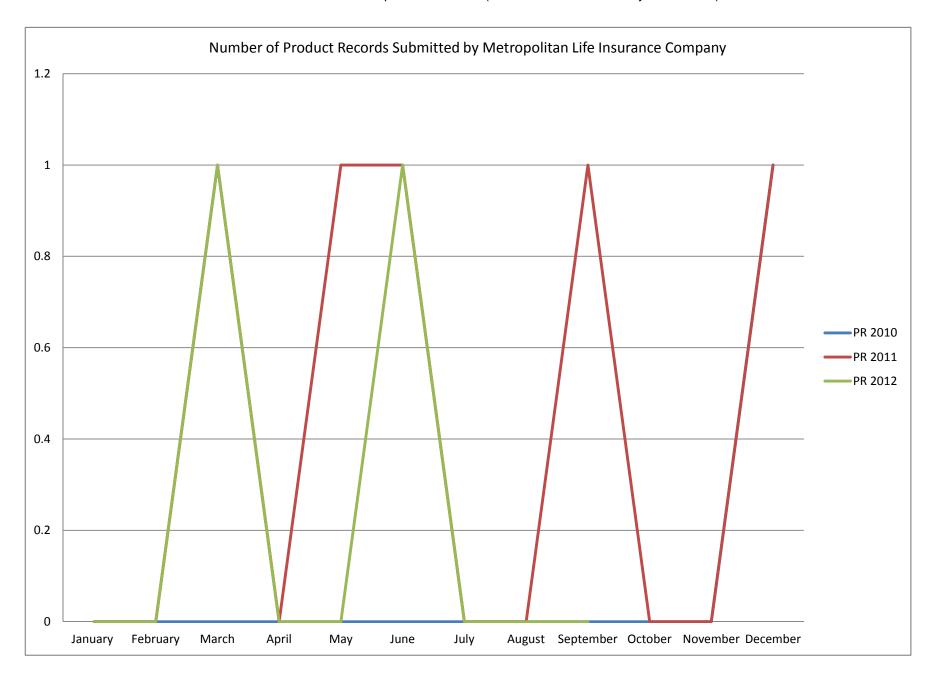
Metropolitan Life Insurance Company														
File	Submis sion													
Type*	Year	January	February	March	April	May	June	July	August	September		November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	1	1
PR	2011	0	0	1	0	1	1	0	0	1	0	0	1	5
PR	2012	0	0	1	0	0	1	0	0	0				2
ME	2009	0	0	0	0	0	0	0	0	0	0	0	646,875	646875
ME	2010	0	0	0	0	0	0	0	0	0	0	0	658,337	658337
ME	2011	682,076	686,517	688,143	682,223	682,791	681,021	683,266	681,732	680,659	680,970	681,453	672,440	8,183,291
ME	2012	669,811	667,426	666,077	666,483	668,177	666,248	669,361	668,261	668,094	667,694			6,677,632
PV	2011	4,726	4,899	4,954	5,082	5,146	5,160	5,125	5,144	5,176	4,905	4,961	5,041	60,319
PV	2012	5,150	5,194	5,232	5,287	5,279	5,355	5,381	5,456	5,599	5,668			53,601
MC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
РС	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2008	199,260	185,158	205,582	209,742	201,327	201,893	196,172	187,250	194,263	208,080	180,971	189,597	2,359,295
DC	2009	212,255	203,091	232,981	232,922	214,775	232,254	221,032	202,283	204,768	210,614	200,991	220,735	2,588,701
DC	2010	211,706	208,232	255,382	231,177	215,863	231,478	210,207	217,958	207,387	198,625	213,205	228,291	2,629,511
DC	2011	200,562	199,878	258,882	219,565	226,850	241,041	200,790	240,595	210,508	212,826	223,398	235,465	2,670,360
DC	2012	243,823	201,436	254,811	231,648	251,540	165,407	152,229	172,119					1,673,013

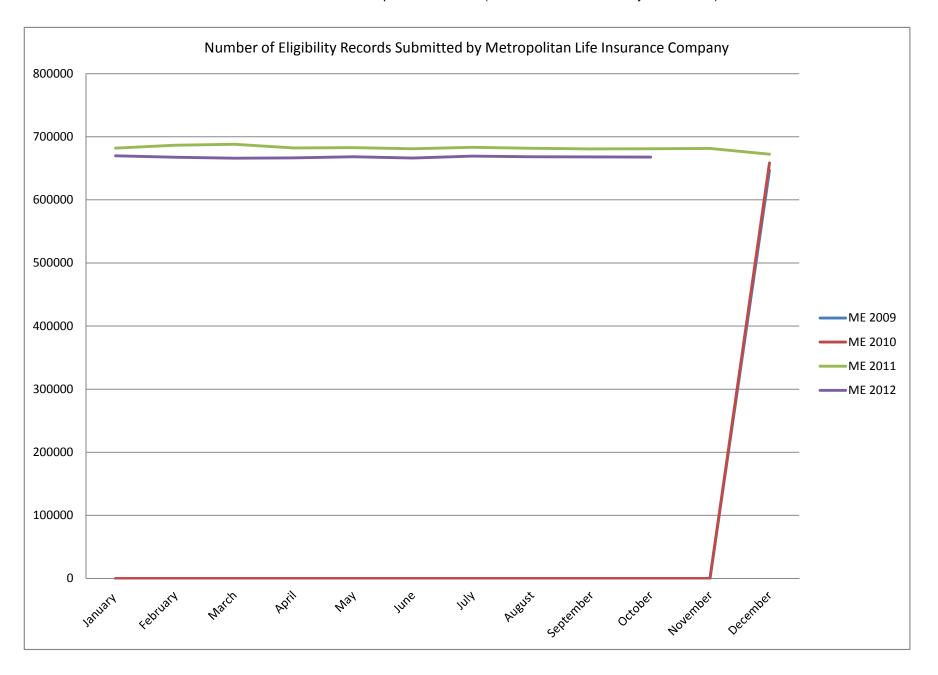
\*Key: PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

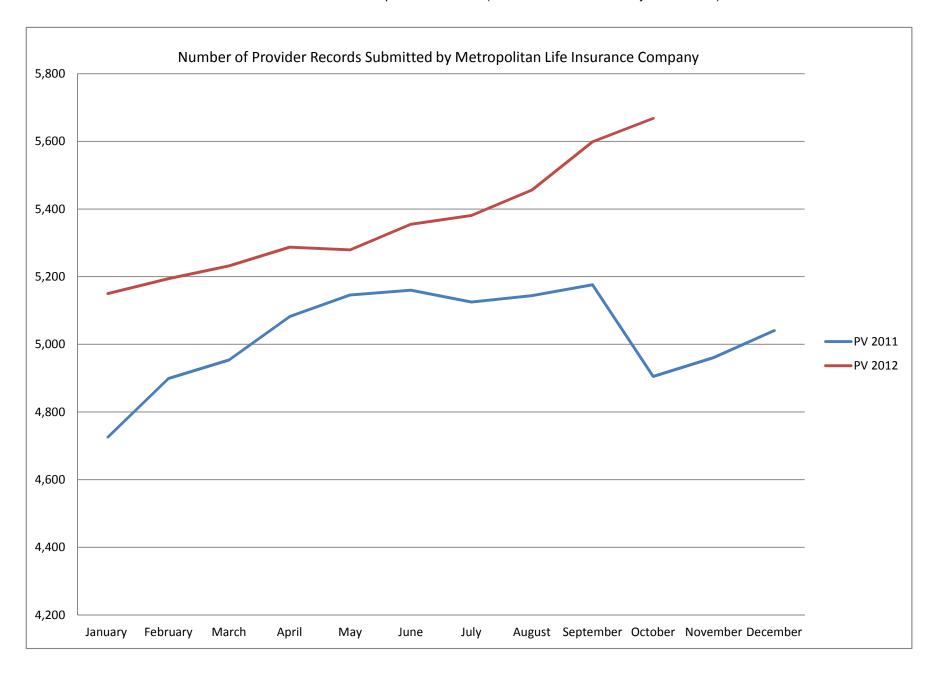
## The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:

- · Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

  These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.







2/28/2013

